


POLICY AND PROCEDURE

<u>POLICY TITLE:</u> Provision of Culturally and Linguistically Appropriate Services	<u>POLICY #:</u> DSAMH012
<u>PREPARED BY:</u> DSAMH Policy Committee	<u>DATE ISSUED:</u> 08/16/19
<u>RELATED POLICIES:</u>	<u>REFERENCE:</u>
<u>DATES REVIEWED:</u> 10/3/22	<u>DATES REVISED:</u> 9/28/22
<u>APPROVED BY:</u>  10/17/22 11:24 AM PDT	<u>NOTES:</u> <input type="checkbox"/> DSAMH Internal Policy <input checked="" type="checkbox"/> DSAMH Operated Program <input checked="" type="checkbox"/> DSAMH State Providers <input type="checkbox"/> Delaware Psychiatric Center <input type="checkbox"/> Targeted Use Policy (Defined in scope)

I. PURPOSE:

The purpose of this policy is to highlight the need for culturally and linguistically appropriate services throughout the Division of Substance Abuse and Mental Health (DSAMH) and their contracted agencies.

II. POLICY STATEMENT:

It is the policy of DSAMH that the Department of Health and Social Services (DHSS) Principles and Beliefs are adhered to in all areas, but specifically in reference to respecting individuals regardless of age, color, disability, ethnicity, gender, gender identity, nationality, race, religion, and sexual orientation. These principles and standards pertaining to cultural competence are mandatory throughout DSAMH and its contracted agencies.

III. DEFINITIONS:

“Cultural Competence” means the ability to interact effectively with people of different cultures helps to ensure the needs of all community members are addressed.

“Cultural and Linguistic Competence” means a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations.

“Culture” means integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups.

“Competence” means having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities.

“Cultural Competency Basic Training” means training curriculum provided by DSAMH or procured by the contracted provider that is utilized to orient new staff to Cultural Competency.

IV. SCOPE:

This policy applies to all DSAMH-operated programs, DSAMH-contracted providers, and all employees, temporary workers, volunteers, interns, or subcontractors working in those sites. This policy is not intended to replace additional obligations under federal or State laws, rules and regulations. Employees who hold professional licenses are also expected to abide by their scope of practice and relevant ethical standards as they apply to their discipline and cultural competency requirements.

V. RESPONSIBILITIES:

- A. DHSS Principles and Beliefs states: “Achieving excellence in human relations is simply a matter of respect for the individual, regardless of age, color, disability, ethnicity, gender, gender identity, nationality, race, religion, and sexual orientation. Behaviors which demean or offend people are not acceptable and will not be tolerated.” DSAMH supports these principles and cultural competence standards which are expected of behavioral health providers.
- B. Health Equality: The U.S. Department of Health and Human Services Office of Minority Health reports that “Though health inequities are directly related to the existence of historical and current discrimination and social injustice, one of the most modifiable factors is the lack of culturally and linguistically appropriate services, broadly defined as care and services that are respectful of and responsive to the cultural and linguistic needs of all individuals.” They have advanced a guide for a national standard for having “Culturally and Linguistically Appropriate Services.” DSAMH is invested in health equality and expects employees and DSAMH-contracted providers to actively promote respectful and responsive cultural and linguistic practices.
- C. Clinical Cultural Competency: The National Association of Social Workers states “Cultural Competence” requires “self-awareness, cultural humility, and the commitment to understanding and embracing culture as central to effective practice.” The Substance Abuse and Mental Health Administration values service providers being culturally competent and has a free resource available (TIP 59: Improving Cultural Competence). DSAMH recognizes that achieving cultural competence in the arena of mental health and substance abuse is vital and is a continuous learning process for the employee and the service provider agencies.
- D. Cultural Competency Basic Training: DSAMH-operated programs and DSAMH-contracted providers will deliver training during initial orientation and on-boarding process. DSAMH-contracted providers shall identify and procure training for their staff’s initial orientation. Annual training is recommended, with at least three (3) hours of training every two (2) years. Clinical staff may require specialized supervision and support, depending on presenting issues.
- E. Language: DSAMH-operated programs and DSAMH-contracted providers must have a plan to provide linguistically appropriate services or have capacity to utilize translation and interpretative services, as needed, or as defined in contract (scope of intensity and diversity of languages required may vary by contract).

- F. Accountability: DSAMH-operated programs and DSAMH-contracted providers will address any employee who demonstrates behaviors which demean or offend people, or are culturally inappropriate.
- G. Policy expectations for providers: DSAMH-operated programs and DSAMH-contracted providers must have a written policy or policies for staff and the agency to provide culturally appropriate services to members from different backgrounds and cultures. Policies must address basic cultural competency training, fostering an environment for on-going development of cultural competencies, language resources, and employee accountability.
- H. Employee Cultural Conflict: Agencies must have a documented plan to address issues of cultural conflict between employees, or between clients and employees. The plan must be focused on employee education and awareness. Under no circumstance should client care be disrupted.

VI. POLICY LIFESPAN: This policy will be reviewed annually.

VII. RESOURCES: N/A